DR-2 Disclosure Summary Page

Delta Dental of lo	wa PAC		S	tatus:	Audited
Committee Type:	Iowa PAC		S	tatutory Due Date	7/19/2015
County:	_NA		Α	djusted Due Date	
District:	0		F	iled Date	7/13/2015 2:53:18 PM
Committee Code:	9764		Р	ostmark Date	
Political Party:	Not Available		Α	mendment Date	
Report Date:	2015	Candidate Name:			

Treasurer

Last Name: Perkins		First Name:	Sherry	MI:
Address: 5729 NW 3rd Ct				
City: Des Moines	State: IA	Zip Code:	50313	Phone: 515-261-5554
E-Mail: sperkins@deltadentalia.com		-		

Chairperson

Last Name: Russell	First Name:	Jeffrey		MI: S	
Address: 5414 Ingersoll Ave					
City: Des Moines	State: IA	Zip Code:	50312	Phone: 515-2	261-5522
E-Mail: jrussell@deltadentalia.com	•	•			

Statement of Cash On Hand

Cash on Hand at Start of Period	\$5,320.00
Schedule A: Cash Contributions Total	\$4,980.00
Schedule F1: Loans Received Total	\$0.00
Schedule H2: Campaign Property Sales	\$0.00
Sub-Total	\$10,300.00
Schedule B: Expenditure Total	\$950.00
Schedule F2: Cash Loan Repayments	\$0.00
Cash on Hand at End of Period	\$9,350.00

Additional Assets and Liabilities

Loans in Place at Start of Period	\$0.00
Schedule D: Unpaid Bills	\$0.00
Schedule E: In-Kind Contributions	\$0.00
Schedule F2: Forgiven Loans	\$0.00
Schedule F2: Outstanding Loans	\$0.00
Schedule G: Consultant Breakdown	No
Schedule H1: Campaign Property Value	\$0.00